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SURVEY INSTRUCTIONS

		No		
	\checkmark	Yes→ If Yes, Go to Question 1 on Page 1		
♦	You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:			
♦	Answer <u>all</u> the questions by checking the box to the left of your answer.			

This box should be placed on the Cover Page

All information that would let someone identify you or your family will be kept private. {VENDOR NAME} will not share your personal information with anyone without your OK. You may choose to answer this survey or not. If you choose not to, this will not affect the health care you get.

Your responses to this survey are completely **confidential**. Once you complete the survey, place it in the envelope that was provided, seal the envelope, and return the envelope to [INSERT VENDOR ADDRESS].

You may notice a number on the cover of this survey. This number is **only** used to let us know if you returned your survey so we don't have to send you reminders.

If you want to know more about this study, please call XXX-XXX-XXXX.

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1. According to our records, you have visited a [NAME OF PROVIDER] clinic in the last 12 months. Which clinic or clinics did you visit to get care for yourself in the last 12 months? Mark one or more. 1	4. In the last 12 months, when you called or went to a [NAME OF PROVIDER] clinic to get an appointment for care you needed right away, how often did you get an appointment as soon as you thought you needed it? Never 2 Sometimes 3 Usually 4 Always 5. In the last 12 months, when you called or went to a [NAME OF PROVIDER] clinic to get an appointment for care you needed right away, how long did you usually have to wait between trying to get an appointment and actually seeing a doctor or other health professional? Same day 2 to 3 days 4 to 7 days 4 to 7 days
Getting Care Quickly	5 ☐ 8 to 14 days
	⁶ □ 15 days or longer
The next questions ask about <u>your own</u> health care. Do <u>not</u> include care you got when you stayed overnight in a hospital. Do <u>not</u> include the times you went for dental care visits. Answer only for the care you got from [NAME OF PROVIDER].	6. In the last 12 months, not counting the times you needed care right away, did you make any appointments for your health care at a [NAME OF PROVIDER] clinic? 1 Yes 2 Now If No. Go to Question 8
3. In the last 12 months, did you call or go to a [NAME OF PROVIDER] clinic to get an appointment for an illness, injury or condition that needed care right away?	² □ No→ If No, Go to Question 8
¹ ☐ Yes ² ☐ No → If No, Go to Question 5	

	the times you needed care right away, how often did you get an appointment for your health care at a [NAME OF PROVIDER] clinic as soon as you thought you needed it? 1 Never 2 Sometimes 3 Usually 4 Always		checked in for your appointment at a [NAME OF PROVIDER] clinic, were you kept informed about how long you would need to wait for the person you went to see? 1 Definitely yes 2 Somewhat yes 3 Somewhat no 4 Definitely no
	After Hours Care		
•	In the least 40 months alidered sell a		Your Primary Doctor or Nurse
8.	In the last 12 months, did you call a [NAME OF PROVIDER] clinic for medical help or advice after regular office hours? ¹□ Yes ²□ No → If No, Go to Question 10	12.	A primary doctor or nurse is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a primary doctor or nurse?
9.	In the last 12 months, when you called a [NAME OF PROVIDER] clinic after regular office hours, how often did you get the medical help or advice you needed?	13.	 ¹☐ Yes ²☐ No→ If No, Go to Question 29 on page 4 How long has this person been
	· •	13.	your primary doctor or nurse?
	¹☐ Never ²☐ Sometimes		¹☐ Less than 6 months
	³☐ Usually		² ☐ At least 6 months but less than 1
	⁴ □ Always		year ³ □ At least 1 year but less than 3
			years
	Wait Time		⁴ ☐ At least 3 years but less than 5
10.	Wait time includes time spent in the waiting room and exam room. In the last 12 months, how often did your visit with the person you went to see start within 15 minutes of your appointment?		years ⁵ □ 5 years or more
	¹□ Never		
	² ☐ Sometimes		
	³ ☐ Usually		
	⁴ □ Always		

14.	Which one of the following clinics do you go to when you see your primary doctor or nurse? 1 [CLINIC 1] 3 [CLINIC 2] 4 [CLINIC 3]	18.	In the last 12 months, did you and your primary doctor or nurse talk about specific things you could do to prevent illness? 1 Yes 2 No
	⁵ □ [CLINIC 4] ⁶ □ [CLINIC 5] ⁷ □ Another clinic (please print)	19.	In the last 12 months, did you want your primary doctor or nurse's help in making changes in your habits or lifestyle to prevent illness?
15.	In the last 12 months, how many times did you visit your primary doctor or nurse to get care for yourself ¹□ None→ If None, go to Question 29 on Page 4	20.	¹☐ Yes ²☐ No In the last 12 months, did your primary doctor or nurse encourage you to talk about your health
	2		concerns, including those that might be embarrassing? 1 Yes 2 No
	⁶ □ 5 to 9 ⁷ □ 10 or more times	21.	In the last 12 months, did you and your primary doctor or nurse talk about how to maintain a healthy diet and healthy eating habits?
16.	In the last 12 months, did your primary doctor or nurse suggest that you see a specialist for a health problem?		¹□ Yes ²□ No
17.	¹ ☐ Yes ² ☐ No→ If No, Go to Question 18 In the last 12 months, how often did your primary doctor or nurse seem	22.	In the last 12 months, did you and your primary doctor or nurse talk about the exercise or physical activity you get? 1 Yes
	informed and up-to-date about the care you got from specialists? ¹□ Never ²□ Sometimes	23.	² □ No In the last 12 months, did you and your primary doctor or nurse talk about things in your life that worry
	³ □ Usually ⁴ □ Always		you or cause you stress? ¹ Yes ² No
		•	

24.	use other tobacco products every day, some days, or not at all? 1 □ Every day 2 □ Some days 3 □ Not at all → If Not at all, Go to Question 28 4 □ Don't know → If Don't know, Go to Question 28	where 0 is the worst primary doctor or nurse possible and 10 is the best primary doctor or nurse possible, what number would you use to rate your primary doctor or nurse? □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
25.	In the last 12 months, were you advised to quit smoking or stop using tobacco by your primary doctor or nurse? 1 Yes 2 No	3 3 4 4 4 5 5 5 6 6 6 7 7 7 8 8 8
26.	Medication to help you quit smoking can include nicotine gum, patch, nasal spray, inhaler, or prescription medication. In the last 12 months, did your primary doctor or nurse recommend or discuss medication to help you quit smoking or using tobacco? 1 Yes 2 No	9
27.	In the last 12 months, did your primary doctor or nurse recommend or discuss methods or	months, did you try to make any appointments to see a specialist? ¹□ Yes ²□ No→ If No, Go to Question 34 on Next Page

30.	In the last 12 months, how often was it easy to get appointments with specialists? 1 Never 2 Sometimes 3 Usually	34. 35.	In the last 12 months, did you try to get any care, tests or treatment? ¹☐ Yes ²☐ No→ If No, Go to Question 36 In the last 12 months, how often
	⁴ □ Always		was it easy to get the care, tests or treatment you thought you needed?
31.	How many specialists have you seen in the last 12 months?		¹ ☐ Never ² ☐ Sometimes
	 None→ If None, Go to Question 34 1 specialist 		³ ☐ Usually ⁴ ☐ Always
	3□ 2		
	⁴ □ 3		Communication
	⁵ 4	36.	In the last 12 months, how often did your primary doctor or nurse
32.	In the last 12 months, how often did the specialists you saw seem to		explain things in a way that was easy to understand?
	know the important information about your medical history?		¹ ☐ Never ² ☐ Sometimes
	¹□ Never		³☐ Usually
	² ☐ Sometimes		⁴ □ Always
	³ ☐ Usually ⁴ ☐ Always	37.	In the last 12 months, how often did your primary doctor or nurse listen carefully to you?
33.	Which of the following clinics did you visit to see a specialist in the last 12 months? Mark one or more.		¹☐ Never 2☐ Sometimes
	¹ □ [CLINIC 1]		³☐ Usually
	³ ☐ [CLINIC 2]		⁴ □ Always
	⁴ ☐ [CLINIC 3]	38.	In the last 12 months, how often did
	⁵ □ [CLINIC 4] ⁶ □ [CLINIC 5]		your primary doctor or nurse show respect for what you had to say?
	⁷ ☐ Another clinic (please print)		¹□ Never
			² ☐ Sometimes
			³ ☐ Usually
			⁴ □ Always

39. In the last 12 months, how often did your primary doctor or nurse spend enough time with you? 1 Never 2 Sometimes 3 Usually 4 Always Communication About Prescription Medicines	43. In the last 12 months, how often did a doctor or other health professional explain in a way that was easy to understand what to do if your illness or health condition got worse or came back? 1 Never 2 Sometimes 3 Usually 4 Always
40. In the last 12 months, did you get any prescriptions for medicines	Communication About Test Results
that you had not taken before? ¹☐ Yes ²☐ No→ If No, Go to Question 42 41. In the last 12 months, how often did your primary doctor or nurse explain the purpose of these medicines in a way that was easy to understand? ¹☐ Never ²☐ Sometimes ³☐ Usually ⁴☐ Always	 44. In the last 12 months, did any health professional (including a doctor) send you for a blood test, x-ray, or other test? ¹□ Yes ²□ No→ If No, Go to Question 47 45. In the last 12 months, when a health professional sent you for a blood test, x-ray, or other test, how often did someone from the health professional's office follow up to give you the test results? ¹□ Never ²□ Sometimes
Communication About Illnesses or Health Conditions	³☐ Usually ⁴☐ Always
 42. In the last 12 months, did you see a doctor or other health professional for an illness or health condition that was bothering you? ¹□ Yes ²□ No→ If No, Go to Question 44 	46. In the last 12 months, how often did doctors or other health professionals explain test results in a way that was easy to understand? 1 Never 2 Sometimes 3 Usually 4 Always

			OF PROVIDER] Clinic
47.	Choices for your treatment or health care can include choices about medicine, surgery or other treatment. In the last 12 months, did a doctor or other health professional recommend a treatment for a health problem that was bothering you? 1 Yes 2 No	51.	In the last 12 months, how often were clerks and receptionists at your [NAME OF PROVIDER] clinic as helpful as you thought they should be? 1 Never 2 Sometimes 3 Usually 4 Always
48.	In the last 12 months, did a doctor or other health professional tell you there was more than one choice for your treatment or health care? 1 Yes	52.	clerks and receptionists at your [NAME OF PROVIDER] clinic treat you with courtesy and respect?
	² ☐ No→ If No, Go to Question 51		¹ ☐ Never ² ☐ Sometimes
49.	In the last 12 months, did a doctor or other health professional talk with you about the pros and cons of each choice for your treatment or		3 Usually 4 Always
	health care?		Prescriptions
	 ¹☐ Definitely yes ²☐ Somewhat yes ³☐ Somewhat no ⁴☐ Definitely no 	53.	In the last 12 months, did you need any new prescription medicine or need to refill a prescription?
50.	In the last 12 months, when there was more than one choice for your treatment or health care, did a		 Yes No→ If No, Go to Question 56 on Next Page
	doctor or other health professional ask which choice you thought was best for you?		In the last 12 months, was it easy to
	ask which choice you thought was		get prescription medicine you needed through your [NAME OF PROVIDER] clinic?

Making Decisions About Your Care

Clerks and Receptionists at Your [NAME

55. In the last 12 months, how often did you get the prescription medicine you needed through your [NAME OF PROVIDER] clinic? 1 Never 2 Sometimes 3 Usually	58. In the last 12 months, did you feel that a health professional you saw judged you unfairly or treated you with disrespect because of your tribal affiliation?
Overall Rating Of Clinic 56. For this next question, please think about the [NAME OF PROVIDER] clinic you visited most often in the last 12 months. Using any number from 0 to 10 where 0 is the worst clinic possible and 10 is the best clinic possible, what number would	59. Blood quantum level refers to the level of tribal blood required for membership in an Indian tribe. In the last 12 months, did you feel that a health professional you saw judged you unfairly or treated you with disrespect because of your blood quantum level? ¹□ Yes ²□ No ³□ I'm not sure
you use to rate the clinic?	Look for Information
³	60. In the last 12 months, did you look for information in written materials or on the Internet about how to get care from a [NAME OF PROVIDER] clinic or hospital?
⁷ □ 7 ⁸ □ 8	¹ ☐ Yes ² ☐ No → If No, Go to Question 62
⁹ □ 9 ¹⁰ □ 10 Best possible clinic	61. In the last 12 months, how often did the written materials or the Internet provide the information you wanted on how to get care from a [NAME
Discrimination	OF PROVIDER] clinic or hospital?
57. In the last 12 months, have you ever felt that a health professional you saw judged you unfairly or treated you with disrespect for any reason?	 Never Sometimes Usually Always
¹ ☐ Yes ² ☐ No→ If No, Go to Question 60	

63.	PROVIDER] has a Web site? 1☐ Yes 2☐ No→ If No, Go to Question 65 In the last 12 months, did you visit	67.	seen a doctor or other health professional 3 or more times for the same condition or problem? 1 ☐ Yes 2 ☐ No→ If No, Go to Question 69
	the [NAME OF PROVIDER] Web site to get information or help about the hospital or clinics? ¹□ Yes ²□ No→ If No, Go to Question 65	68.	Is this a condition or problem that has lasted for at least 3 months? Do not include pregnancy. 1 Yes 2 No
64.	In the last 12 months, how often did the [NAME OF PROVIDER] Web site provide the information or help you wanted about the hospitals or clinics?	69.	Do you now need or take medicine prescribed by a doctor? Do not include birth control?
	¹☐ Never 2☐ Sometimes		¹ ☐ Yes ² ☐ No→ If No, Go to Question 71
	³ □ Usually ⁴ □ Always	70.	Is this to treat a condition that has lasted for at least 3 months? Do not include pregnancy or menopause.
	ABOUT YOU		¹□ Yes
The	re are only a few questions left.		² □ No
65.	In general, how would you rate your overall health?	71.	What is your age?
66.	1 Excellent 2 Very good 3 Good 4 Fair 5 Poor In general, how would you rate your overall mental or emotional health? 1 Excellent 2 Very good 3 Good	72.	 1 □ 18 to 24 2 □ 25 to 34 3 □ 35 to 44 4 □ 45 to 54 5 □ 55 to 64 6 □ 65 to 74 7 □ 75 or older Are you male or female? 1 □ Male 2 □ Female
	⁴ ☐ Fair ⁵ ☐ Poor		

73.	What is the highest grade or level of school that you have completed?	77. How did that person help you? Mark all that apply.
	 No formal education 5th grade or less 6th, 7th or 8th grade Some high school, but did not graduate High school graduate or GED Some college or 2-year degree 4-year college graduate More than 4-year college degree 	 Read the questions to me Wrote down the answers I gave Answered the questions for me Translated the questions into my language Helped in some other way (Please print)
74.	What is your race? Please mark one or more. 1 American Indian or Alaskan Native Please print your tribal affiliation: 2 Asian 3 Black or African-American 4 Native Hawaiian or other Pacific Islander 5 White 6 Other (please print):	THANK YOU Please return the completed survey in the postage-paid envelope
75.	What language do you <u>mainly</u> speak at home?	
	¹ ☐ English ² ☐ [NATIVE LANGUAGE]	
	8☐ Some other language (please print):	
76.	Did someone help you complete this survey?	
	 Yes→ Go to Question 77 No→ Please return the survey in the postage-paid envelope. 	